

ATTACHMENT

12

must be submitted through the Law Library or Designee

Inmate/Offender Grievance Process

REQUEST TO STAFF

TO: Mrs. Allen 4/4 Pravo FACILITY/UNIT: Gr. P. C. C. DATE: 2-26-24
(NAME AND TITLE OF STAFF MEMBER) 202402518I have _____ have not X already submitted a "Request to Staff" or grievance on this same issue.

If yes, what date: _____ facility: _____ grievance #: _____

I affirm that I do _____ do not X have a grievance pending on this issue.I affirm that I do _____ do not X have a lawsuit of any type pending that relates in any way to this issue.

If a lawsuit is pending, indicate case number and court: _____

This request _____ does _____ does not relate to a pending misconduct report. If it does, this request may only be answered by the disciplinary coordinator assigned to the misconduct.

SUBJECT: State completely, but briefly, the problem on which you desire assistance. This statement must be specific as to the complaint, dates, places, personnel involved, and how you were affected. One issue or incident per "Request to Staff." Your failure to specifically state your problem may result in this being returned unanswered.

I would like to call my lawyer A.S.A.P please
and thank you

(USE OTHER SIDE IF MORE SPACE IS NEEDED. DO NOT ATTACH ADDITIONAL PAGES.)

ACTION REQUESTED: State exactly how you believe your request may be handled; that is, what exactly should be done and how.

about the I would like to call lawyer A.S.A.P

NAME: Michael W. A. ODOC #: 671170 UNIT & CELL NUMBER: BB-209
(PRINT)

SIGNATURE: _____ WORK ASSIGNMENT: _____

DO NOT WRITE BELOW THIS LINE

DISPOSITION:

Added — provided

Great Plains Correctional Center
RECEIVEDFEB 28 2024
STAFF MEMBER
LAW LIBRARY

DATE

3-12-24

Great Plains Correctional Center
RETURNED

Date response sent to inmate/offender: _____

1. Original to file
2. Copy to inmate/offender

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LAW LIBRARY